PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This for	arm should be used for tran	namitting the ISSUE F	EE and PUBLIS	CATION FEE (if rec	quired). Blocks I through 5 will be mailed to the currents, and/or (b) indicating a ser	should be completed where
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CURRENT CURRESPONDENCE ADDRESS (Note: Use Block 1 for say change of address) 26241 7590 03/03/2006 ROBERT A SEEMANN 89 EARL AVE HAMDEN, CT 06514				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Posini Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
				Anthony	P. Gangemi	(Depositor's name)
				William	Phongery	(Zigrzze)
				Way 15,	28060	(Date)
APPLICATION NO.	FILING DATE	FIRS	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,847	10/626,847 07/23/2003		Neeman Malck		UBI201	1885
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	74	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUB
nonprovisional	ponprovisional YES			\$300	\$1000	06/05/2006
EXAMINER		ART UNIT	CI	LASS-SUBCLASS	7	
KYLE, MICHAEL J 367				016-194000	MS/16/2006 TRESHAH2	00000051 231665 10
"Fee Address" indicated PTO/SB/47; Rev 03-02 Number is required.	dence address (or Change of 22) attached. tion (or "Fee Address" Indica or more recent) attached. Use	ation form report of a Customer lis	(1) the names of up to 3 registered patefrinting 531 Anthony or in Gangemi or agents OR. alternatively, OFFC: 1504 (2) the name of a single firm (having as a premise of a p			
					mee is identified below, the d	Incument has been filed for
(A) NAME OF ASSIGN				g an assignment. CITY and STATE OR	mee is identified below, the d	
Pomeroy, In	Dubuque, Iowa USA					
Please check the appropriate	s assignee category or catego:	ries (will not be printed	on the patent);	☐ Individual 🖾 C	Corporation or other private gr	oup entity 🚨 Government
4a. The following fee(s) are Italian Italian Italian	mail entity discount permitte	:d) 🔲 P	b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card, Form PTO-2035 is attached. The Director is horeby authorized by charge the required fee(s), or credit any overpayment to Deposit Account Number 23-1665 (enclose an extra copy of this form).			
	(from status indicated above MALL ENTITY status. See 3)			ALL ENTITY status, See 37 C	
			ee (if any) or to anyone other the.	re-apply any previous nan the applicant; a reg	sly paid issue fee to the application attorney or agent; or the	tion identified above.
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